


New DUNS in the new CCR Redesign screens

CCR Web Update - Microsoft Internet Explorer

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CCR

Central Contractor Registration

New Registration

Welcome to CCR

To begin your registration we must verify your company information using your DUNS number provided by Dun & Bradstreet, Inc. Please input your DUNS number and click submit.

If you do not know your DUNS number, contact Dun & Bradstreet at 1-800-333-0505 (U.S. Only) or www.dnb.com.

DUNS #

Submit Reset

[Return to Previous Page](#)
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Note to all Users: This is a Department of Defense Information System. Use of this system constitutes consent to monitoring at all times.

You may contact D&B Customer Service at 1-800-333-0505 (U.S. only) or www.dnb.com to verify your company name, address, city and state in their system.

Done


Start Sent Items - Mic... CCR Redesign T... hpsql4-11 - Mic... CCR Web Up... New CCR Scree... Internet 10:47 AM

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CCR

Central Contractor Registration

DUNS Number 780745493 is correctly formatted and is new to CCR. Please fill in the information below and click on submit to complete the validation of your business

Legal Business Name:

Doing Business As:

(or any)

Address:

City:

State Code:

Zip/Postal Code:

Country Code:

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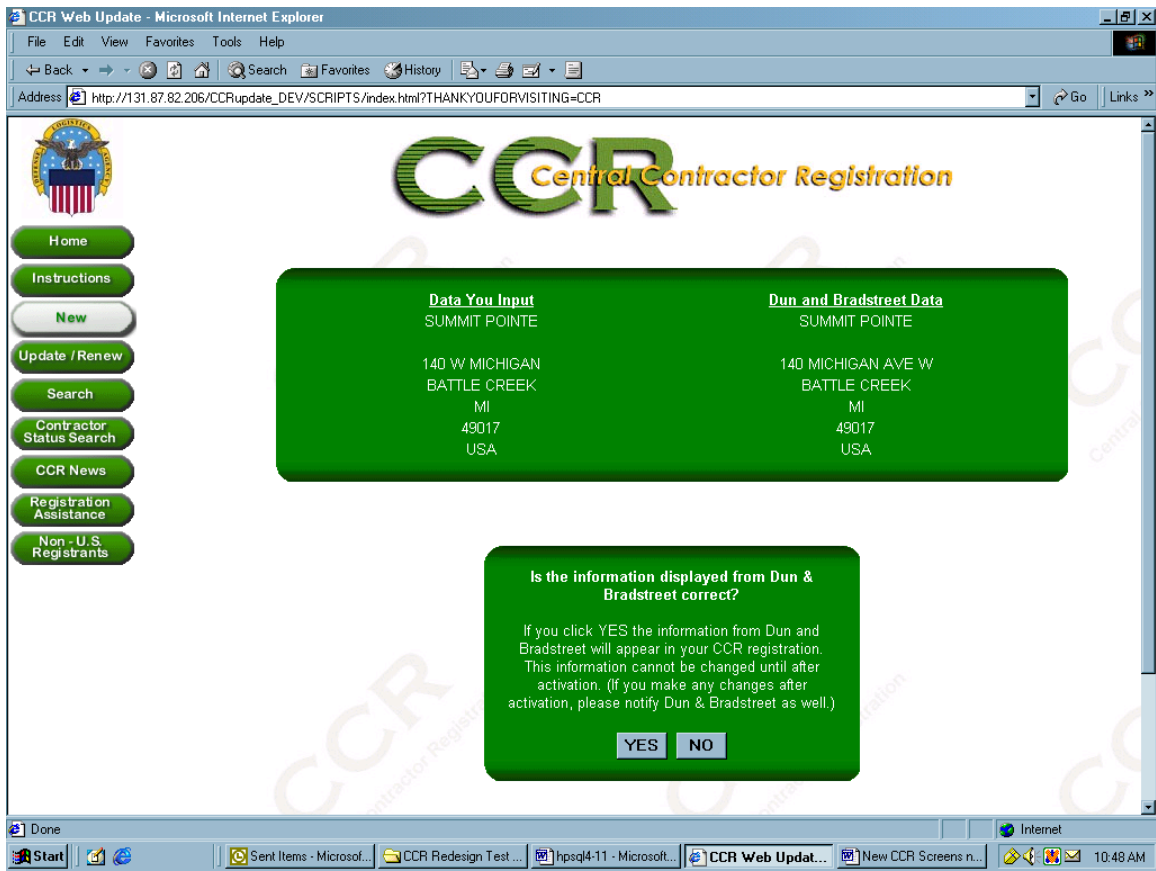
Note to all Users: This is a Department of Defense Information System. Use of this system constitutes consent to monitoring at all times.

You may contact D&B Customer Service at 1-800-333-0505 (U.S. only) or www.dnh.com to verify your company name, address, city and state in their system.

Done

Start | Sent Items - Micr... | CCR Redesign T... | hpsq4-11 - Micr... | CCR Web Up... | New CCR Scree... | Internet

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CCR

Central Contractor Registration

Your Confirmation Number is:

8KX4MY

This number is temporary and will be needed to update your registration until it is completed. Please print this page.

[Click Here To Print Your Confirmation Number](#)

Please click on the Continue button to complete your registration.

[Continue](#)

[Return to Previous Page](#)

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Note to all Users: This is a Department of Defense Information System. Use of this system constitutes consent to monitoring at all times.

You may contact D&B Customer Service at 1-800-333-0505 (U.S. only) or www.dnb.com to verify your company name, address, city and state in their system.

Done Internet

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Registration Menu

Required Information	Status
General Information	-
Corporate Info	-
Goods/ Services	-
Financial	-
Points of Contact	-

Optional Information

EDI	NR
DUNS +4	NR

Registration Status

New Registration

To complete your registration process, read the following instructions, and then continue onto the Trading Partner Profile data entry screens. In order to complete a minimum registration, a response is required for all mandatory fields (flagged with a green box). Complete the registration process by clicking "Validate/Save Data" through each page presented, and providing as much data as is available.

Each time you press "Validate/Save Data" your registration page will be validated, and a list of outstanding errors or omissions for that page will be presented. If you end this session without completing all required fields, you can return at any time and finish your registration by going to "Update" in CCR (the registration will not process until all errors have been corrected, and all mandatory fields have been entered in).

Upon successful registration of your Trading Partner Profile (TPP) into CCR, validation will take approximately 24 hours to complete. If approved, you will receive via e-mail or US Postal Service, one letter containing your Trading Partner Profile (TPP) with your CAGE Code, and another containing your Trading Partner Identification Number (TPIN). At that time your temporary Confirmation Number is no longer valid. Perform future updates/changes by selecting Update, then TPIN Update.

The maintenance and accuracy of your TPP is your responsibility. To maintain an Active status in CCR and to ensure continued payments on existing contracts, you must renew your registration annually.

CCR Warning Message

Back Forward Refresh

Do not use Back, Forward, or Refresh buttons on your internet browser. This will cause problems with your CCR Registration.

NOTE: "You are encouraged to provide e-mail addresses on all Points of Contact (POC) and the Corporate URL (web address) on the General Information page."

Continue

Done

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Optional Information

EDI

DUNS +4

Status

NR

NR

Registration Status

New Registration

General Information

Missing or Invalid Data

Required Data

View-Only Data (Edits not allowed)

DUNS

780745493

DUNS PLUS4

CAGE/NCAGE Code

*NCAGE Mandatory if outside the U.S. Search for CAGE or NCAGE

Legal Business Name

SUMMIT POINTE

(DCMA ACO Locator)

Doing Business As (DBA)

(leave DBA blank if same)

TIN/EIN

(See Note Below)

SSN

Enter SSN only if sole Proprietor without a TIN

Division Name

Division Number

Company URL

Physical Street Address 1

140 MICHIGAN AVE W

Physical Street Address 2

City

BATTLE CREEK

State

MI

(U.S. State Code / Canadian Province list)

Zip/Postal Code

49017

Country

USA

Check to use Physical Information for the Mailing Info.

Mailing Name

Done

Start

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☐ Check to use Physical Information for the Mailing Info

* Mailing Name:

* Mailing Address 1:

Mailing Address 2:

* City:

* State: (U.S. State Code / Canadian Province list)

* Zip/Postal Code:

* Country:

Parent Company Name:

*Note: (Headquarters - parent company is optional; but if entered, all data fields must be entered.)

Parent Company DUNS #:

Street Address 1:

Street Address 2:

City:

State: (U.S. State Code / Canadian Province list)

Zip/Postal Code:

Country:

* Business Start Date: (MM/DD/YYYY)

* Number of Employees: No commas

* Fiscal Year End Date: (MM/DD)

* Annual Revenue \$: No Commas

Company Security Level: Not Applicable

Highest Employee Security Level: Not Applicable

Registration Tools

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Registration Menu

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Optional Information Status
EDI NR
DUNS +4 NR

Registration Status

New Registration

Done

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EDI NR
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Registration Status

New Registration

Parent Company Name:

*Note: (Headquarters - parent company is optional; but if entered, all data fields must be entered.)

Parent Company DUNS #:

Street Address 1:

Street Address 2:

City:

State: (U.S. State Code / Canadian Province list)

Zip/Postal Code:

Country:

* Business Start Date: (MM/DD/YYYY)

* Number of Employees: No commas

* Fiscal Year End Date: (MM/DD)

* Annual Revenue \$: No Commas

Company Security Level: Not Applicable

Highest Employee Security Level: Not Applicable

Important: If you are unable to receive mail at your street address, you MUST also provide a valid mailing address where correspondence can be sent.
Note: Authority 31 U.S.C. 7701 (c) (3)
Principal Purpose(s): The TIN may be used by the Government to collect and report on any delinquent amounts arising out of the offeror's relationship with the Government.
Disclosure: Voluntary; however, failure to furnish will disallow registration as a Federal contractor.

Validate/Save Data

Done

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Corporate Info

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Financial

Points of Contact

Optional Information

EDI

DUNS +4

Status

!

-

-

-

-

NR

NR

Registration Status

Incomplete Registration

You have 11 errors on the General Information section.
The valid data was saved.

You now have four options; (1.) Click "Fix Errors" to view and correct your errors now; (2.) Click "Continue" to go onto the Corporate Info page, and fix the errors on this page at a later time; (3.) Use the "Registration Menu" on the left of your screen to pick a specific CCR Update page; (4.) Click "Quit" to leave CCR Update and finish your registration at another time.

Quit

Fix Errors

Continue

CCR Contractor Registration

Done Internet

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Goods / Services	-
Financial	-
Points of Contact	-

Optional Information

EDI	NR
DUNS +4	NR

Registration Status

Incomplete Registration

Corporate Information

Missing or Invalid Data Required Data View-Only Data (Edits not allowed)

* **Type of Organization** (Check One)

☐ Corporate Entity, Not Tax Exempt

☐ Corporate Entity, Tax Exempt

☐ State of Incorporation: (State code list)

or Country:

☐ Partnership

☐ Sole Proprietorship

☐ Sole Proprietor Name:

☐ US Phone: Ext:

☐ Non-US Phone:

☐ Fax:

☐ E-mail:

☐ U.S. Government Entity

☐ Federal Government

☐ State Government

☐ Local Government

☐ Foreign Government

☐ International Organization

☐ Other

* **Business Type** (Must check at least one, may select all that apply.)

☐ 8(a) Program Participant ☐ Construction Firm ☐ Municipality

Done

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Optional Information Status
EDI NR
DUNS +4 NR

Registration Status

Incomplete Registration

*** Business Type** (Must check at least one, may select all that apply.)

<input type="checkbox"/> 8(a) Program Participant	<input type="checkbox"/> Construction Firm	<input type="checkbox"/> Municipality
<input type="checkbox"/> American Indian Owned	<input type="checkbox"/> Educational Institution	<input type="checkbox"/> Nonprofit Organization
<input type="checkbox"/> HUB Zone Firm (*See note below)	<input type="checkbox"/> Emerging Small Business	<input type="checkbox"/> Research Institution
<input type="checkbox"/> Minority Owned Business	<input type="checkbox"/> Foreign Supplier	<input type="checkbox"/> S Corporation
<input type="checkbox"/> Large Business	<input type="checkbox"/> Historically Black College/University	<input type="checkbox"/> Service Location
<input type="checkbox"/> Small Business	<input type="checkbox"/> Labor Surplus Area Firm	<input type="checkbox"/> Sheltered Workshop (JWOD Supplier)
<input type="checkbox"/> Small Disadvantaged Business	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Tribal Government
<input type="checkbox"/> Woman Owned Business	<input type="checkbox"/> Manufacturer of Goods	
<input type="checkbox"/> Veteran Owned Business	<input type="checkbox"/> Minority Institution	
<input type="checkbox"/> Service Disabled Veteran Owned		

(*Note: HUB Zone Firm is a Historically Undersitized Business Zone Firm.)

Minority Owned Business Specific Types (Complete only if minority owned business is selected from above.)

☐ Subcontinent Asian (Asian-Indian) American Owned

☐ Asian-Pacific American Owned

☐ Black American Owned

☐ Hispanic American Owned

☐ Native American Owned

☐ No Representation/None of the Above

Party Performing Certification (Small Business Administration)

*This is mandatory if you check 8(a) Program Participant from the Business Types above. (Must be U.S. business.)

Certifiers Name:

Street Address Line 1:

Street Address Line 2:

City:

State: (U.S. State Code / Canadian Province list)

Zip/Postal Code:

Done

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☐ Small Disadvantaged Business
☐ Woman Owned Business
☐ Veteran Owned Business
☐ Service Disabled Veteran Owned
☐ Limited Liability Company
☐ Manufacturer of Goods
☐ Minority Institution
☐ Tribal Government

(*Note: HUB Zone Firm is a Historically Underutilized Business Zone Firm.)

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Optional Information Status
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DUNS +4 NR

Registration Status
Incomplete Registration

Minority Owned Business Specific Types (Complete only if minority owned business is selected from above.)
☐ Subcontinent Asian (Asian-Indian) American Owned
☐ Asian-Pacific American Owned
☐ Black American Owned
☐ Hispanic American Owned
☐ Native American Owned
☐ No Representation/None of the Above**Party Performing Certification (Small Business Administration)**
**This is mandatory if you check 8(a) Program Participant from the Business Types above. (Must be U.S. business.)*
Certifiers Name:
Street Address Line 1:
Street Address Line 2:
City:
State: (U.S. State Code / Canadian Province list)
Zip/Postal Code:
Country:

Validate/Save Data

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Financial	-
Points of Contact	-

Optional Information	Status
EDI	NR
DUNS +4	NR

Registration Status

Incomplete Registration

You have 2 errors on the Corporate Information section.
The valid data was saved.

You now have four options; (1.) Click "Fix Errors" to view and correct your errors now; (2.) Click "Continue" to go onto the Goods/Services page and fix the errors on this page at a later time; (3.) Use the "Registration Menu" on the left of your screen to pick a specific CCR Update page; (4.) Click "Quit" to leave CCR Update and finish your registration at another time.

Quit Fix Errors Continue

Done

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Optional Information

Status

EDI	NR
DUNS +4	NR

Registration Status

Incomplete Registration

Goods / Services

Missing or Invalid Data

Required Data

View-Only Data (Edits not allowed)

* North American Industry Classification System (NAICS)

Mandatory - (6 numeric digits)

The North American Industry Classification System (NAICS) identifies what type of activity (e.g. Agriculture, mining, construction, manufacturing, etc.) your business performs as well as the type of product or service you offer. The government buyers will access the CCR to query those vendors with appropriate NAICS to meet their procurement needs. Please refer to <http://www.census.gov/epcd/www/naics.html>

NAICS 6 Digit List: <http://www.census.gov/epcd/naics/naics6digit.xls>

(Only 20 allowed)

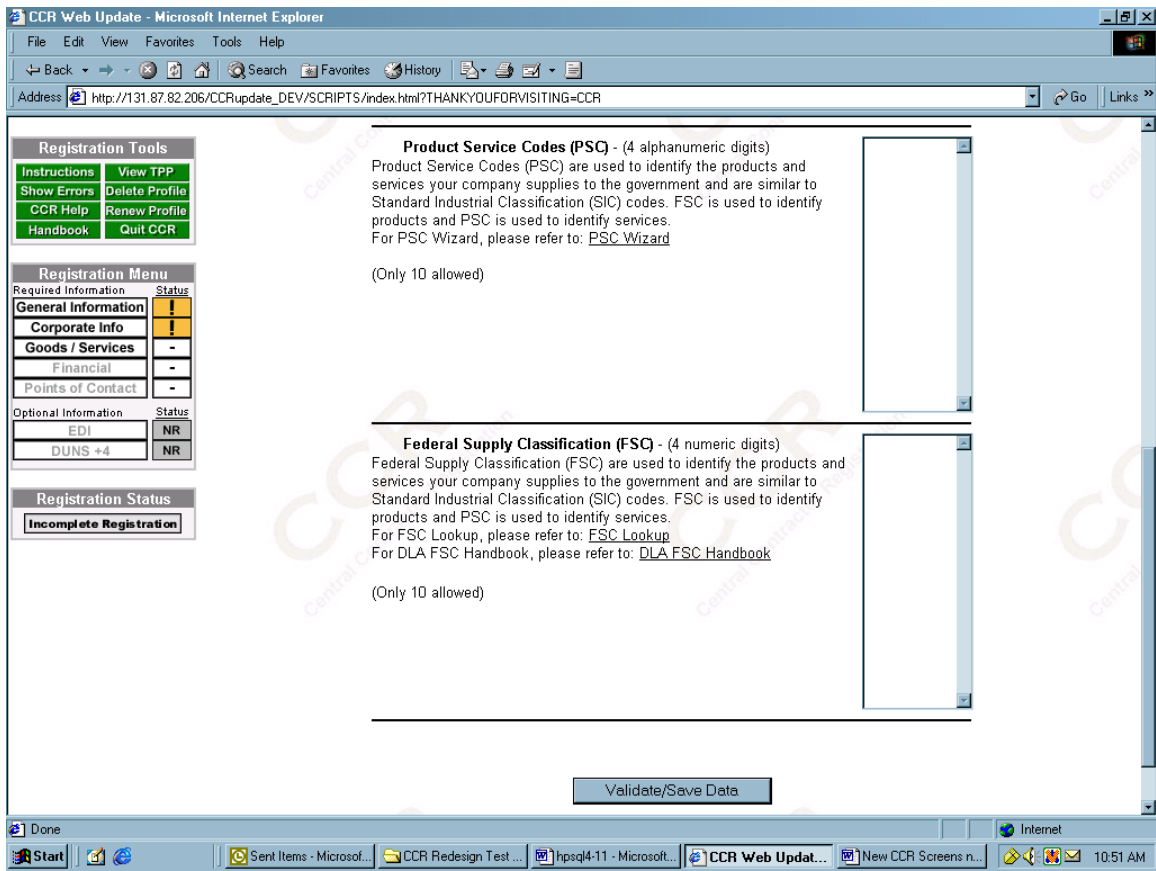
* Standard Industrial Classification (SIC) Mandatory - (4 or 8 numeric digits)

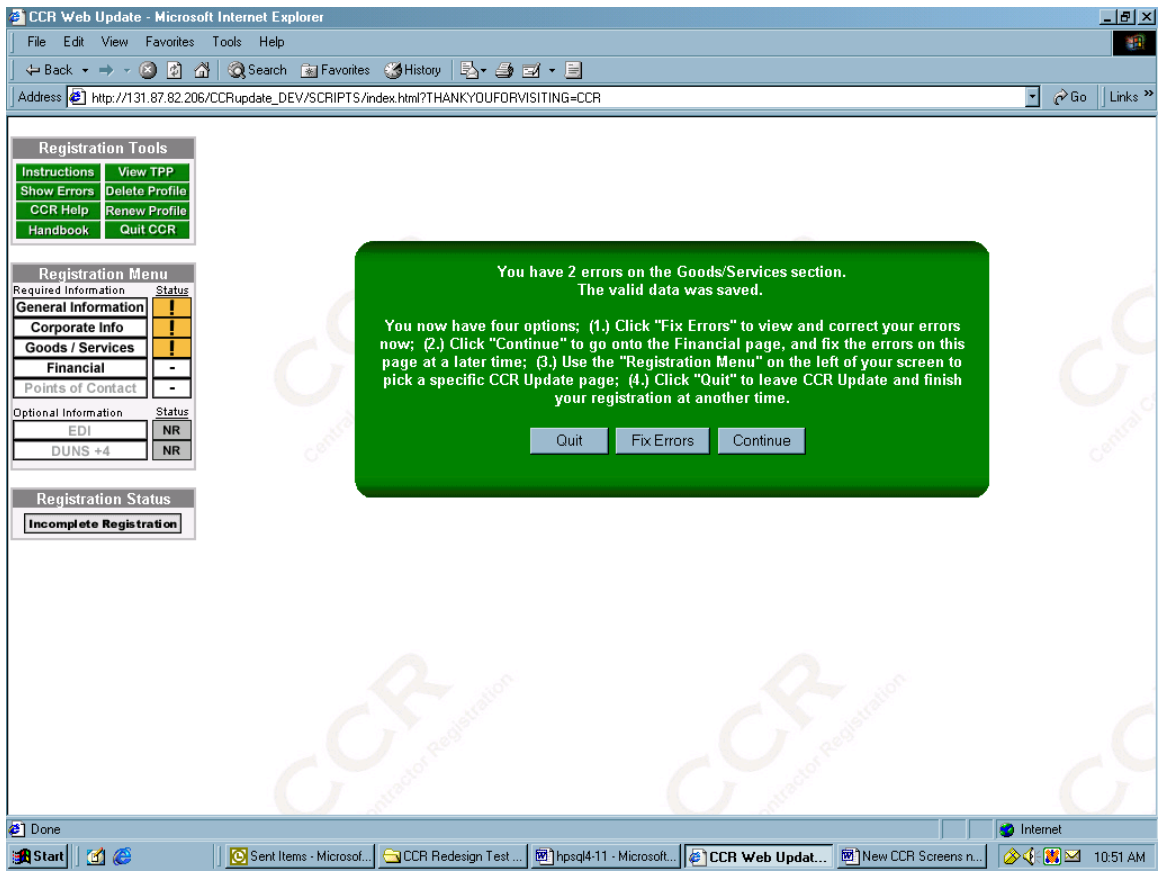
The Standard Industrial Classification (SIC) coding system identifies what type of activity (e.g. Agriculture, mining, construction, manufacturing, etc.) your business performs as well as the type of product or service you offer. The government buyers will access the CCR to query those vendors with appropriate SIC to meet their procurement needs. Please refer to [\(SIC Code Reference Web Site\)](#)

(Only 20 allowed)

Done

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Optional Information	Status
EDI	NR
DUNS +4	NR

Registration Status

Incomplete Registration

Financial Information

Missing or Invalid Data * Required Data View-Only Data (Edits not allowed)

Electronic Funds Transfer (EFT)

**This content is optional for Non-U.S. Businesses*

☐ *Financial Institution:

☒ ABA Routing Number:

☒ Account Number:

☒ Account Type: ☐ Checking ☐ Savings ☐

Lockbox Number:

☐ *Authorization Date: (MM/DD/YYYY)

☒ **Automated Clearing House (ACH)**

*(*At least one method of contact must be entered for your financial institution unless you are a government organization or a Non-U.S. Business.)*

ACH US Phone Number:

ACH Non-US Phone Number:

ACH FAX (US Only):

ACH E-mail Address:

☒ **Remittance Information**

(Address to mail check if EFT is temporarily unavailable.)

Name:

Done

Start

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Optional Information	Status
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Registration Status

Incomplete Registration

*** Remittance Information**

(Address to mail check if EFT is temporarily unavailable.)

Name:

Address Line 1:

Address Line 2:

City:

State: (U.S. State Code / Canadian Province list)

Zip/Postal Code:

Country:

*** Accounts Receivable Point of Contact:**

Name:

E-mail Address:

U.S. Phone Number: Ext:

Non-U.S. Phone Number:

Fax Number:

*** Does the company accept Credit Cards as a method of Payment?**

Yes ☐ No ☒

Done

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!

!

!

!

-

Optional Information

EDI

DUNS +4

Status

NR

NR

Registration Status

Incomplete Registration

You have 14 errors on the Financial Information section.
The valid data was saved.

You now have four options; (1.) Click "Fix Errors" to view and correct your errors now; (2.) Click "Continue" to go onto the Points of Contact page, and fix the errors on this page at a later time; (3.) Use the "Registration Menu" on the left of your screen to pick a specific CCR Update page; (4.) Click "Quit" to leave CCR Update and finish your registration at another time.

Quit

Fix Errors

Continue

Done

Internet

Start

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Optional Information

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DUNS +4	NR

Registration Status

Incomplete Registration

Points of Contact

NOTE: "You are encouraged to provide e-mail addresses on all Points of Contact (POC)"

Missing or Invalid Data Required Data View-Only Data (Edits not allowed)

*** CCR POC (Registrant Name) Primary**

(Note: The Registrant acknowledges that the information provided is current, accurate, and complete. (Required).)

Name:

E-mail Address:

U.S. Phone Number: Ext:

Non-U.S. Phone Number:

Fax Number: Fax Number

*** CCR POC Alternate**

Name:

E-mail Address:

U.S. Phone Number: Ext:

Non-U.S. Phone Number:

Fax Number:

Government Business Point of Contact - Primary

(Note: The person in the company responsible for marketing and sales with the government. This information is optional, and if entered, will be publicly displayed on the CCR Inquiry Web Site. The MPIN will not be displayed. All methods of contact are required if the Government Business Point of Contact is entered.)

Name:

E-mail Address:

Done

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Points of Contact	-
Optional Information	Status
EDI	NR
DUNS +4	NR

Registration Status

Incomplete Registration

Address Line 1:

Address Line 2:

City:

State: (U.S. State Code / Canadian Province list)

Zip/Postal Code:

Country:

U.S. Phone Number: Ext:

Non-U.S. Phone Number:

Fax Number:

*MPIN:

*MPIN (Marketing Password that the vendor chooses, must be nine (9) alphanumeric characters, non-case-sensitive, and must include at least one (1) alpha and one (1) numeric. Special characters and spaces are not allowed. Will be used for selected e-Business systems access.

☒ Check to use Government Business Primary Information.

Government Business Point of Contact - Alternate

(Note: The person in the company responsible for marketing and sales with the government. This information is optional, and if entered, will be publicly displayed on the CCR Inquiry Web Site.)

Name:

E-mail Address:

Address Line 1:

Address Line 2:

City:

State: (U.S. State Code / Canadian Province list)

Zip/Postal Code:

Country:

U.S. Phone Number: Ext:

Done

Start

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!

!

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-

Optional Information

EDI

DUNS +4

Status

NR

NR

Registration Status

Incomplete Registration

Non-U.S. Phone Number:

Fax Number:

Past Performance Point Of Contact - Primary

(Note: This information is optional, and if entered, will be publicly displayed on the CCR Inquiry Web Site.)

For more information visit the [PPAIS web site](#)

Name:

E-mail Address:

Address Line 1:

Address Line 2:

City:

State:

(U.S. State Code / Canadian Province list)

Zip/Postal Code:

Country:

U.S. Phone Number:

Ext:

Non-U.S. Phone Number:

Fax Number:

Check to use Past Performance POC Information.

Past Performance Point Of Contact - Alternate

(Note: This information is optional, and if entered, will be publicly displayed on the CCR Inquiry Web Site.)

For more information visit the [PPAIS web site](#)

Name:

E-mail Address:

Address Line 1:

Address Line 2:

City:

Done

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Financial	!
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Optional Information

	Status
EDI	NR
DUNS +4	NR

Registration Status

Incomplete Registration

State: (U.S. State Code / Canadian Province list)

Zip/Postal Code:

Country:

U.S. Phone Number: Ext:

Non-U.S. Phone Number:

Fax Number:

Electronic Business Point of Contact - Primary

(Note: The person in the company responsible for authorizing individual company personnel access into government electronic business systems [e.g. Electronic Document Access (EDA), Wide Area Work Flow (WAWF), etc.] This information is optional, and if entered, will be publicly displayed on the CCR Inquiry Web Site.)

Name:

E-mail Address:

Address Line 1:

Address Line 2:

City:

State: (U.S. State Code / Canadian Province list)

Zip/Postal Code:

Country:

U.S. Phone Number: Ext:

Non-U.S. Phone Number:

Fax Number:

☐ Check to use Electronic Business POC Information

Electronic Business Point of Contact - Alternate

(Note: This information is optional, and if entered, will be publicly displayed on the CCR Inquiry Web Site.)

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Optional Information

	Status
EDI	NR
DUNS +4	NR

Registration Status

Incomplete Registration

☐ Check to use Electronic Business POC Information

Electronic Business Point of Contact - Alternate
(Note: This information is optional, and if entered, will be publicly displayed on the CCR Inquiry Web Site.)

Name:

E-mail Address:

Address Line 1:

Address Line 2:

City:

State: (U.S. State Code / Canadian Province list)

Zip/Postal Code:

Country:

U.S. Phone Number: Ext:

Non-U.S. Phone Number:

Fax Number:

Previous Business Name

Name:

Address Line 1:

Address Line 2:

City:

State: (U.S. State Code / Canadian Province list)

Zip/Postal Code:

Country:

Government Parent

Done

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Optional Information

	Status
EDI	NR
DUNS +4	NR

Registration Status

Incomplete Registration

Zip/Postal Code:

Country:

Government Parent

(Note: Used by registering government agencies. If this CCR registration is a division of the government, provide the parent (HQ), e.g. DLA)

Name:

Address Line 1:

Address Line 2:

City:

State: (U.S. State Code / Canadian Province list)

Zip/Postal Code:

Country:

Validate/Save Data

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Optional Information	Status
EDI	NR
DUNS +4	NR

Registration Status

Incomplete Registration

You have 4 errors on the Points of Contact section.
The valid data was saved.

*You do not need to continue on and fill out the Optional Pages [EDI] and [DUNS+4].
If you wish to fill out the Optional Pages, then click the continue button.*

You now have four options; (1.) Click "Fix Errors" to view and correct your errors now; (2.) Click "Continue" to go onto the optional EDI page, and fix the errors on this page at a later time; (3.) Use the "Registration Menu" on the left of your screen to pick a specific CCR Update page; (4.) Click "Quit" to leave CCR Update and finish your registration at another time.

Quit Fix Errors Continue

Done

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Optional Information	Status
EDI	NR
DUNS +4	NR

Registration Status

Incomplete Registration

The EDI Information is OPTIONAL Information. If you are NOT currently using a Value Added Network (VAN) do not fill out this page.

If you came here by mistake, you can select a different page from the "Registration Menu" located on the left of your screen, or [click here](#) to quit CCR Update.

EDI Information

Missing or Invalid Data Required Data View-Only Data (Edits not allowed)

Completing this EDI section of the CCR application DOES NOT make you EDI compliant. In order to successfully complete the Electronic Commerce Interoperability Process (ECIP), you must utilize an authorized Value-Added-Network (VAN) connected to the DoD Electronic Commerce Infrastructure (ECI).

You can obtain a list of authorized Value-Added-Networks (VANs) connected to the DoD Electronic Commerce Infrastructure (ECI) from: http://www.acq.osd.mil/ec/ecip/van_list.htm

Please select your value added network

Interchange ID (ISA) Qualifier

Interchange ID (ISA) Qualifier - designates the code structure used to identify the company's sender/receiver information in EDI transactions.

Interchange Sender ID (ISA) Identifier

Interchange Sender ID (ISA) Identifier - value corresponding to company's qualifier selected for EDI

Done

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EDI

DUNS +4

Status

!

!

!

!

!

NR

NR

Registration Status

Incomplete Registration

Interchange Sender ID (ISA06) Identifier - value corresponding to company's qualifier selected for EDI transactions. No dashes, spaces or special characters.

*** Functional Group (GS02) Identifier**

Functional Group (GS02) Identifier - this further defines the company's identifiers for the addressing of EDI transactions. No dashes, spaces, or special characters.

*** Do you want to receive Remittance Advice Notices (820's) through your Value Added Network provider?**

☐ Yes ☒ No

*** EDI Point of Contact Information** - This is the individual within the company that should be contacted if there are any specific EDI concerns. Please provide an individual's name and at least one method of contact. For Phone and Fax Numbers, no dashes, spaces, or special characters. Digits only. *(At least one method of contact is required.)*

Name:

E-mail Address:

U.S. Phone Number: Ext:

Non-U.S. Phone Number:

Fax Number:

Done

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